

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Donald A Cox
1507 Haver Road
Darien, OH 43146

2. Article Number

(Transfer from service label)

7009 2820 0003 5800 1964

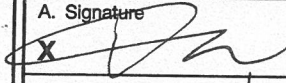
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature


☐ Agent
☒ Addressee

B. Received by (Printed Name)

Donald A Cox

C. Date of Delivery

12/16/02

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

23-mc-39 AzM

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

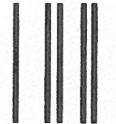
4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE

COLUMBUS OH 430

15 DEC 2003 PM 11



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

OFFICE OF THE CLERK
U.S. DISTRICT COURT
JOSEPH P. KENNEDY U.S. COURT
85 MARCONI BLVD. SUITE
COLUMBUS, OH 43215

U.S. DISTRICT COURT
SOUTHERN DIST. OHIO
EAST DIV. COLUMBUS

2003 DEC 20 PM 2:11

FILED
RICHARD W. NAGEL
CLERK OF COURT

